

## State of California **Secretary of State**

## LIMITED LIABILITY COMPANY RESTATED ARTICLES OF ORGANIZATION

in the office of the Secretary of S of the State of California

JUL **13** 2012

A \$30.00 filing fee must accompany this form.

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IMPORTANT -	Read	instructions	before	compl	etina	this	form.

This Space For Filing Use Only 2. NAME OF LIMITED LIABILITY COMPANY: SECRETARY OF STATE FILE NUMBER 01111 2 1 0 0 5 / ZME dia 100 CLC

NAME OF LIMITED LIABILITY COMPANY IF DIFFERENT FROM ITEM 2. (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY" OR "LTD. 201111 210051 LIABILITY CO." OR THE ABBREVIATIONS "LLC OR L.L.C.") **FUTURE EFFECTIVE DATE, IF ANY:** MONTH: THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT. CHECK THE APPROPRIATE PROVISION BELOW AND NAME THE AGENT FOR SERVICE OF PROCESS AN INDIVIDUAL RESIDING IN CALIFORNIA. PROCEED TO ITEM 7 A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO SECTION 1505. PROCEED TO ITEM 8. AGENT'S NAME: Philip Gatt CALIFORNIA ADDRESS OF THE AGENT FOR SERVICE OF PROCESS. COMPLETE ONLY IF AN INDIVIDUAL. ADDRESS 7988 Aldea Cir ZIP CODE: 92648 THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY: (CHECK ONE) ONE MANAGER MORE THAN ONE MANAGER ALL LIMITED LIABILITY COMPANY MEMBER(S) 9. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE THE LATEST DATE ON WHICH THE LIMITED LIABILITY IS TO DISSOLVE. TOTAL NUMBER OF PAGES ATTACHED, IF ANY: 11. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. SIGNATURE OF AUTHORIZED PERSON RETURN TO: Zmedianow LC 200 Goddard NAME FIRM

Irvine CA 92618

ADDRESS CITY/STATE